

**PSYCHOSOMATIC OPHTHALMOLOGY**—T. F. Schlaegel, Jr., M.D., Assistant Professor of Ophthalmology, Director of Research, Department of Ophthalmology, Indiana University School of Medicine, Indianapolis, Indiana, with the collaboration of Millard Hoyt, M.D., formerly Director of the Adult Psychiatry Outpatient Clinic and Instructor in Psychiatry, Indiana University School of Medicine. The Williams & Wilkins Company, Baltimore, 1957. 523 pages, \$11.00.

The psychosomatic approach to ophthalmology is relatively new and has been neglected by many ophthalmologists, although most realize its importance.

Doctor Schlaegel, who is assistant professor of ophthalmology at Indiana University School of Medicine, has had training in psychiatry, which is apparent when one reads the book. He had defined psychosomatic ophthalmology as a method of approach in which somatic investigation is not neglected but in which psychologic and somatic factors are considered conjointly.

In this volume Doctor Schlaegel has assembled the widely scattered literature on the subject and has attempted to evaluate it. To this material he has added his own observations and case histories.

The book has been divided into five parts dealing with general considerations, with some general conditions which may involve the eye, ocular conditions according to anatomic location, ocular conditions without strict anatomic location and psychosomatic approach to treatment.

Whether or not one agrees with the ideas put forth, the book should be read, especially the first part which gives the modern approach to psychosomatic ophthalmology. The book is very readable and has a good deal of food for thought. The chapter of surgery seemed to be particularly rewarding.

While it may be considered controversial, the book should be in the library of every ophthalmologist and those who are interested in psychomatic medicine.

The paper, type and general format of the book are up to the usual high standard of Williams and Wilkins.

FREDERICK C. CORDES, M.D.

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**BREAST CANCER** (The Second Biennial Louisiana Cancer Conference, New Orleans, January 22-23, 1958)—Edited by Albert Segaloff, M.D., Director of Endocrine Research, Alton Ochsner Medical Foundation; Associate Professor of Clinical Medicine, Tulane University School of Medicine. Sponsored by the American Cancer Society, Louisiana Division, Inc. The C. V. Mosby Company, St. Louis, 1958. 257 pages, \$5.00.

Breast cancer remains ubiquitous and a therapeutic enigma. In an attempt to make matters less enigmatic, a special cancer conference was held at New Orleans in January 1958. This book summarizes the proceedings.

The first section deals with "Basic Biology," and consists of articles on epidemiology, biologic determinism, pathology, cytology, etiology and the care of terminally ill patients. In this section one of the brighter chapters deals with pathology and its endless variations. Figures 13 to 22 inclusive show photomicrographs of apparently ten different types of breast cancer. However, they were all taken from the same cancerous breast. Macdonald summarizes his evidence for believing that about 55 per cent of primary breast cancers are inherently unfavorable (remote spread occurs before the tumors are clinically detectable), about 20 per cent are favorable (slow growth), and in the remaining 25 per cent prognosis is related to promptness of adequate treatment. This is the one group in which educational propaganda may prove useful.

The second section deals with "Definitive Treatment"—ranging from simple to radical surgery and moderate to radical radiotherapy. By radical surgery is meant the re-

moval of the internal mammary chain en bloc with the breast, the axillary contents, the suitable area of skin, etc. The advantages and limitations of the McWhirter program are outlined and the excellent results obtained by this careful worker described in some detail.

The third section deals with "Basic Biology" from the hormonal and metabolic viewpoint. Some possibilities of chemotherapy in advanced breast cancer are outlined.

The fourth section deals with "Hormonal Therapy," subtractive or additive. That roentgen castration is just as effective as surgical castration for the palliation of advanced mammary cancer is now well established. But habit is ingrained, and there is some persistent partiality for surgical. Gordon and Segaloff conclude on page 196 that x-ray or surgery *yield the same results, with similar hormone changes*, "if the x-ray therapy is given over a period of at least seven days." Like surgery, x-ray therapy must be competently accomplished. Adrenalectomy is discussed at some length, but hypophysectomy is accorded only brief space.

The monograph terminates with a summation by the editor, who must be congratulated on securing such prompt publication of so commendable a collection of essays. The work is recommended especially for internists, surgeons, generalists and radiologists.

L. HENRY GARLAND, M.B.

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**EMERGENCY WAR SURGERY**—U. S. Armed Forces issue of NATO Handbook, Prepared for Use by the Medical Services of NATO Nations. Prepared under the sponsorship of the Assistant Secretary of Defense (Health and Medical) Frank B. Berry, M.D. Printed by the United States Government Printing Office, Washington, D. C., 1958. Sold by the Superintendent of Documents, U. S. Government Printing Office, Washington 25, D. C., 411 pages, \$2.25.

This book, Emergency War Surgery, is the U. S. Armed Forces issue of the NATO Handbook. It has been prepared for use by the Medical Services of NATO nations. The purpose of the book is to see that the information on emergency war surgery gained from the past major conflicts is reviewed, brought up-to-date and does not lie fallow between conflicts. It is hoped, of course, that knowledge of this type will not have to be used in the future, but inevitably physicians must be prepared for the special exigencies of war surgery.

Military surgery is designed to carry out specialized and essential medical care under adverse conditions of war. It is further characterized by the fact that the welfare of the individual must be sacrificed at times to the demands of the military effort and tactical situations of conflict. This brief but excellent book of 380 small pages of text, clearly written, nicely printed and beautifully presented, summarizes our present state of knowledge with respect to mass casualties, thermal burns, thermonuclear injuries, radiation injuries, response of the body to wounding, metabolic disturbances after trauma, infection, and general wound management in its opening chapters. It then proceeds to the discussion of sorting of casualties and care of patients at battalion aid stations prior to transportation back to definitive hospital care. The principles of emergency management are stressed throughout in injuries of the soft tissues, vascular injuries, bone and joint injuries, nerve injuries, abdominal and thoracic wounds. It is simply but profusely illustrated. It is an excellent handbook of emergency war surgery and one with which every physician should be thoroughly acquainted, be he general practitioner, internist, or surgeon.

The details of surgical management are not given but the principles of medical care are simply and admirably stated. The book is highly recommended for its special coverage of the problems in emergency war surgery.

VICTOR RICHARDS, M.D.